

interval (CI)] = 1.3 [1.03–1.6] and 1.4 [1.1–1.8], respectively) and persistence (OR [95% CI] = 1.4 [1.1–1.7] and 1.3 [1.1–1.6], respectively). Older age ( $\geq 60$  years) was associated with higher adherence (OR [95% CI] = 1.6 [1.3–1.9]), but not persistence. Similarly, comorbid hypertension and heart disease were associated with higher adherence only (OR [95% CI] = 1.4 [1.1–1.8] and 1.2 [1.01–1.5], respectively). **CONCLUSIONS:** In a real-life setting, adherence and persistence to oral mesalazine was relatively poor. Male gender and current corticosteroid use were patient characteristics associated with higher adherence and persistence.

#### PGI11

##### ASSOCIATION BETWEEN KNOWLEDGE AND HEALTH RELATED QUALITY OF LIFE IN HEPATITIS B PATIENTS

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**OBJECTIVES:** To evaluate association between patients' knowledge of Hepatitis-B and Health Related Quality of Life (HRQoL). **METHODS:** A cross sectional, descriptive study was undertaken with 390 Hepatitis-B patients attending two public hospitals of Quetta city, Pakistan. Knowledge towards hepatitis-B was assessed by using a pre validated questionnaire. European Quality of Life scale (EQ-5D) was used for the assessment of HRQoL. Descriptive analysis was used for elaborating patients' demographic characteristics. HRQoL was scored using values derived from the UK general population survey. Spearman's rho correlation was used to identify the association between variables. All analyses were performed using SPSS 16.0. **RESULTS:** Two hundred and thirty two (59.5%) were males with mean age of 36.21 $\pm$ 9.2 years. 103 (26%) had primary level of education with 109 (27.9%) were working in private sector. Eighty four (21%) had monthly income of in between 10001–15000 Pakistan rupees with 272 (69.7%) having urban residency. HRQoL was measured as poor in our study patients (0.46 $\pm$ 0.25). Mean knowledge score was categorized as poor (8.52  $\pm$  2.746). Correlation coefficient between HRQoL and knowledge was -0.102, indicating a weak negative association between the study variables. **CONCLUSIONS:** Results of the present study show that patients' knowledge of hepatitis B is weakly correlated with HRQoL. Having better and correct disease related knowledge could be useful in clinical practice, especially in early stages of hepatitis B, where improving HRQoL could still be possible.

#### PGI12

##### ASSESSMENT OF KNOWLEDGE, ATTITUDE AND PRACTICES OF HEPATITIS B PATIENTS TOWARDS THEIR DISEASE

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**OBJECTIVES:** To evaluate Knowledge, Attitude and Practice (KAP) of Hepatitis-B (HB) patients in Quetta city, Pakistan. **METHODS:** A cross sectional, descriptive study was undertaken with 390 HB patients attending two public hospitals of Quetta city, Pakistan. KAP regarding HB was assessed by using a pre validated questionnaire (20 questions for knowledge, 7 for attitude and 8 for practices). Descriptive analysis was used for elaborating patients' demographic characteristics. Mean scores were taken into account for the assessment of KAP. Spearman's rho correlation was used to identify the association between KAP. All analyses were performed using SPSS 16.0. **RESULTS:** Two hundred and thirty two (59.5%) were males with majority (n=136, 34.9%) falling in age group of 38–47 years. Mean age of the patients was 36.21 $\pm$ 9.2 years. One hundred and forty (26.7%) had primary level of education and 110 (28.2%) were working in private sector. Eighty Three (21.3%) had monthly income of in between 10001–15000 Pakistan rupees with 273 (70%) having urban residency. The mean scores for knowledge, attitude and practice 8.48 $\pm$ 2.7 were 4.07 $\pm$ 1.2 and 2.37 $\pm$ 1.1 respectively. A significant linear correlations between knowledge-attitude (r=0.221, p<0.01) knowledge-practice (r=0.466, p<0.01) and attitude-practice (r=0.224, p<0.01) were observed. **CONCLUSIONS:** Results of the present study show that KAP among HB patients is at lower side. Positive linear correlations, however, predicts that better knowledge can lead to positive attitude and good practices which will prevent the further spread of infection from patients to healthy population.

#### PGI13

##### VACCINATION STATUS AGAINST HEPATITIS B AMONG HEALTHY POPULATION OF QUETTA, PAKISTAN

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**OBJECTIVES:** To evaluate the vaccination status of Hepatitis-B (HB) in healthy population of Quetta city, Pakistan. **METHODS:** A questionnaire based, cross sectional, descriptive study was undertaken. One thousand healthy individuals (aging 18 years and above) from April 2011 to July 2011 were approached for the study in Quetta city, Pakistan. Vaccination status against HB was assessed by using a pre validated questionnaire. Descriptive analysis was used for elaborating participants' demographic characteristic and vaccination status. Chi-square test was used to identify the differences among the different groups of demographics. All analyses were performed using SPSS 16.0. **RESULTS:** A total of 1000 questionnaires were distributed and 780 were included in the final analyses. Four hundred twenty (53.8%) were male, with mean age of 32.76 $\pm$ 9.40 year. Two hundred eight (26.7%) had intermediate level of education and 354 (45.4%) were unemployed. Majority (n=126, 16.2%) had monthly income of Pk.Rs. 5001 to 10,000/-, and 418 (53.6%) lived in urban areas of the city. Majority (n=579, 74.2%) had knowledge about availability of the vaccine against HB but only 103 (13.2%) of the participants received vaccina-

tion. Doubts about safety (56.89%) of vaccination were found to be the major reason for not vaccination. Education level, occupation, income and residence were found have a significant association with vaccination status (p<0.05). **CONCLUSIONS:** Results of the present study show that vaccination status among healthy population was low. Doubts about safety of hepatitis B vaccine were the major reason for non vaccination. It is necessary to educate the people about the safety and effectiveness of the hepatitis B vaccine so that more people could get vaccination which will help prevention of infection.

#### PGI14

##### KNOWLEDGE, ATTITUDE AND PRACTICES TOWARDS HEPATITIS-B AMONG GENERAL POPULATION OF QUETTA, PAKISTAN

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**OBJECTIVES:** To evaluate Knowledge, Attitude and Practices (KAP) of Hepatitis-B (HB) in general population of Quetta city, Pakistan. **METHODS:** A cross sectional, descriptive study was undertaken with 1000 healthy individuals (aged 18 years and above) from April 2011 to July 2011. KAP regarding HB was assessed by using a pre validated questionnaire (20 questions for knowledge, 7 for attitude and 8 for practices). Descriptive analysis was used for elaborating participants' demographic characteristics. Mean scores were taken into account for the assessment of KAP. Spearman's rho correlation was used to identify the association between KAP. All analyses were performed using SPSS 16.0. **RESULTS:** A total of 1000 questionnaires were distributed, out of which 843 were returned (response rate of 84.3%). Seven hundred and eighty were included into the final analysis (sixty three questionnaires were excluded because of incomplete data). Four hundred twenty (53.8%) were male, with mean age of 32.76 $\pm$ 9.40 year. Two hundred eight (26.7%) had intermediate level of education and 354 (45.4%) were unemployed. Majority (n=126, 16.2%) had monthly income of Pk.Rs. 5001 to 10,000, and 418 (53.6%) had urban residency. Mean scores for knowledge, attitude and practice were 8.74 $\pm$ 2.7, 3.72 $\pm$ 1.2 and 2.76 $\pm$ 1.1 respectively. A significant yet moderate positive linear correlations between knowledge-attitude (r=0.296, p<0.01) knowledge-practice (r=0.324, p<0.01) and attitude-practice (r=0.331, p<0.01) were observed. **CONCLUSIONS:** Results of the present study show that knowledge, attitude and practice of healthy general population regarding hepatitis B are low. There are, however, positive linear correlations between knowledge-attitude, knowledge-practice and attitude-practice. This reaffirms that better knowledge can lead to positive attitude resulting in good practices. This can prevent the healthy individual from acquiring HB infection.

#### PGI15

##### COMPARISON OF KNOWLEDGE, ATTITUDE AND PRACTICE AMONG HEPATITIS-B PATIENTS AND HEALTHY POPULATION REGARDING HEPATITIS-B

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**OBJECTIVES:** This study aims to compare knowledge, attitude and practice (KAP) towards Hepatitis-B (HB) between HB patients and healthy individuals. **METHODS:** A cross sectional, descriptive study was undertaken with total 780 participants comprising of two equal groups. HB patients attending two public hospitals were targeted for the study. Healthy individuals were selected from places of public interest at Quetta city, Pakistan. KAP towards HB was assessed by using a pre validated questionnaire. Descriptive analysis was used for elaborating participants' demographic characteristics. Mean scores were taken into account for the assessment of KAP. Mann-Whitney test was used for comparison among study to groups. All analyses were performed using SPSS 16.0. **RESULTS:** Out of 780 participants 433 were males with mean age of 34.69 $\pm$ 9.9. Majority (n=202, 25.8%) had primary level of education and (n=204, 26.1%) were private employees. One hundred and thirty one (16.7%) had monthly income of Pk. Rs. 10001–15000 with 482 (61.7%) had urban residency. There was no significance difference between KAP scores of both groups. **CONCLUSIONS:** Results of the present study show that there is no significance difference between the two groups. Therefore, it is important to educate both patients and healthy individuals for the prevention of transmission of infection from patients to healthy population.

#### PGI16

##### TREATMENT WITH PRUCALOPRIDE FOR CHRONIC CONSTIPATION IMPROVES THE SYMPTOMS AND QUALITY OF LIFE OF PATIENTS IN CHINA

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**OBJECTIVES:** To assess the improvement of symptoms and quality of life (QOL) in patients with chronic constipation (CC) treated with prucalopride in China. **METHODS:** The study was conducted between June 4, 2010 and March 8, 2011 in CC patients at 19 study centers in China. In this multicenter randomized placebo-controlled phase 3 trial, patients with CC either received placebo (n=158) or 2mg of prucalopride (n=155) treatment for 12 weeks. The validated Patient Assessment of Constipation Symptom (PAC-SYM) questionnaire was assessed at specified visits. Data on 12 constipation-related symptoms were obtained from PAC-SYM and summarized into three subscales: stool, abdominal, or rectal symptoms. Patient Assessment of Constipation Quality of Life (PAC-QOL) questionnaire was used to measure QOL which includes an overall scale and four subscales (physical discom-